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				Attorney Docket Numbe	er ELECTRO.001A
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION				First Named Inventor	Michael P. Gorman
				COMPLETE IF KNOWN	
	(37 CFR 1.63)			Application Number	
nca.				Filing Date	
X	Declaration Submitted with Initial Filing	OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit		
			(37 ČFR 1.16 (e))	Examiner Name	

As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled							
Safety Electrical Outlet And Switch System							
the specification of which (Title of the Invention) is attached hereto							
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number and was amended on (MM/DD/YYYY) (if applicable)							
I hereby state that I have revie	wed and understand the	contents of the above iden		n, including the cl	aims, as		
amended by any amendment s	specifically referred to abo	ove					
I acknowledge the duty to discl	ose information which is	material to patentability as	defined in 37 CF	K 1.56.			
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Certified Not Claimed YES		Copy Attached? NO		
none			0000	0000	0000		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s)		January 5, 2000		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filling date of this application.											
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)				arent Patent Number (if applicable)		
none											
Additional	U.S. or PCT international applicat	ion numbers are	listed on a	supple	mental pr	ority data s	heet PT	O/SB/0	2B attached he	ereto	
As a named inv	entor, I hereby appoint the followin	ng registered pra	ctitioner(s)	to pros	ecute this	s application	and to	transac	t all business in Place Custor Number Bar (n the Patent mer	
	X	OR Registered pract	titioner(s) n	ame/rei	gistration	number list	ed belov	, L_	Label her		
		Registr	ation	name/registration number listed below					Registration Number		
Glenn R	Name . Smith	38,308	· · · · · · · · · · · · · · · · · · ·								
	registered practitioner(s) named o		Designations	Prostutu	oper Info	rmation she	et PTO/	SB/02C	attached here	to.	
		Г	Registered	Flacilli	orier milor	1					
Direct all corr		er Number Code Label				OR	X C∘	rrespo	ndence addr	ess below	
Name	Glenn R. Smith	·									
Address	Law Office of Glo	enn R. Sm	ith					-			
Address	311 Santa Barbara	a									
City			State CA		`	ZIP 926		506-0807			
Country	USA	Telephon	e (949) 38	37-10	27	Fax	(94	9) 387-2	1027	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of S	Name of Sole or First Inventor:										
Given Name (first and middle [if any])					Family Name or Surname						
Michael 1.				Gorman							
Inventor's Signature				Date				7/18/0			
Residence:	City Lagura Nigel	State	CA	Со	untry	τ	JSA		Citizenship	USA	
Post Office Address 18 St. Vincent											
Post Office Address											
City	Laguna Nige State	CA	ZIP		926	77	Cou	ntry	ซร	A	
Additiona	I inventors are being named	on the 0 sur	pplementa	al Addi	tional In	ventor(s)	sheet(s	PTO/	SB/02A attac	ched heret	